

Application Serial No. 09/043.933
Attorney's Docket No. 032751-027

REMARKS

Claims 32, 36, 38, 53, 54, 55, 56, 64, 69, 71, 79 and 80 are amended herein, as requested by the Examiner, to further clarify claim dependencies. Thus, no new matter is presented by the amendments made herein.

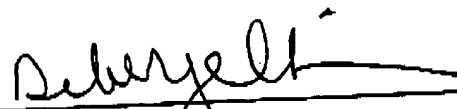
CONCLUSION

In view of the foregoing, further and favorable action in the form of a Notice of Allowance is believed to be next in order. Such action is earnestly solicited.

In the event that there are any questions relating to this application, it would be appreciated if the Examiner would telephone the undersigned attorney concerning such questions so that prosecution of this application may be expedited.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

By: 
Deborah H. Yellin
Registration No. 45,904

P.O. Box 1404
Alexandria, Virginia 22313-1404
(703) 836-6620

Date: May 15, 2003

BURNS DOANEBURNS DOANE SWECKER & MATHIS LLP
ATTORNEYS AT LAWALEXANDRIA, VIRGINIA
REDWOOD SHORES, CALIFORNIA
DURHAM, NORTH CAROLINAREPLY TO:
P.O. Box 1404
Alexandria, Virginia 22313-1404

TELEPHONE: +1.703.836.6620

FACSIMILE: +1.703.836.2021 (Group 3)
+1.703.836.0028 (Group 4)

DATE: May 15, 2003

RECIPIENT INFORMATION	SENDER INFORMATION
To: Examiner S. Foley	From: Deborah H. Yellin
Voice Tel. No.:	Voice Tel. No.: (703) 838-6563
Fax Tel. No.: (703) 746-3118	Sent By: Elizabeth K. Stenson
Your Ref.: 09/506,942	Our Ref.: 032751-027
	Total Pages (Incl. Cover Page): 16

RE: U.S. Patent Application No. 09/506,942

MESSAGE:

Dear Examiner Foley,

Further to your phone message of May 14, 2003, attached is a Supplemental Amendment for the above-identified application.

Should you have any questions, please do not hesitate to contact us.

With continuing best personal regards.

Very truly yours,

Deborah H. Yellin
Reg. No. 45,904

NOTE: The information contained in this facsimile message is attorney-client privileged and contains confidential information intended only for the use of the person(s) named above and others expressly authorized to receive it. If you are not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this message is prohibited and you are asked to notify us immediately by telephone and to return this message to us by mail without copying it.

Any questions regarding compatibility should be directed to our Office Services Department at +1.703.836.6620.

(BDSM 05/01)

Patent
Attorney's Docket No. 032751-027

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of)	Mail Stop Non-Fee Amendment
)	
Jean-Marc BALLOUL <i>et al.</i>)	Group Art Unit: 1648
)	
Application No.: 09/506,942)	Examiner: S. Foley
)	
Filed: February 18, 2000)	Confirmation No.: 9626
)	
For: PHARMACEUTICAL COMPOSITION)	VIA FACSIMILE: (703) 746-3118
FOR TREATING PAPILLOMAVIRUS)	
TUMORS AND INFECTION)	

SUPPLEMENTAL AMENDMENT TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed is a reply for the above-identified patent application.

- ☐ A Petition for Extension of Time is also enclosed.
- ☐ A Terminal Disclaimer and the ☐ \$55.00 (2814) ☐ \$110.00 (1814) fee due under 37 C.F.R. § 1.20(d) are also enclosed.
- ☐ Also enclosed is/are _____
- ☐ Small entity status is hereby claimed.
- ☐ Applicant(s) request continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$375.00 (2801) ☐ \$750.00 (1801) fee due under 37 C.F.R. § 1.17(e).
- ☐ Applicant(s) previously submitted ___, on ___, for which continued examination is requested.
- ☐ Applicant(s) request suspension of action by the Office until at least ___, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.
- ☐ A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.
- ☒ No additional claim fee is required.

(05/03)

Supplemental Amendment Transmittal Letter
 Application No. 09/506,942
 Attorney's Docket No. 032751-027
 Page 2

☐ An additional claim fee is required, and is calculated as shown below:

AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims		MINUS =		× \$18.00 (1202) =	
Independent Claims		MINUS =		× \$84.00 (1201) =	
If Amendment adds multiple dependent claims, add \$280.00 (1203)					
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					

☐ A claim fee in the amount of \$_____ is enclosed.

☐ Charge \$_____ to Deposit Account No. 02-4800.

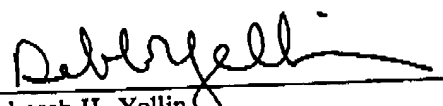
The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: May 15, 2003

By:


 Deborah H. Yellin
 Registration No. 45,904

P.O. Box 1404
 Alexandria, Virginia 22313-1404
 (703) 836-6620

(05/03)

Supplemental Amendment Transmittal Letter
Application No. 09/506,942
Attorney's Docket No. 032751-027
Page 3

I hereby certify that this correspondence is being sent
by Facsimile Transmission to the Assistant
Commissioner For Patents, P.O. Box 1450,
Alexandria, VA 22313-1450 on:

Date: May 15, 2003

Name: Elizabeth K. Stenson

(Typed or printed name of person signing the
certificate)

Sign: Elizabeth K. Stenson

(Signature of person signing the certificate)

Date: May 15, 2003

(Date of Signature)

(05/03)